

UNITED STATES
PATENT AND TRADEMARK
OFFICE

Application Number	09/917,965		
Filing Date	July 30, 2001		
First Named Inventor	Herbert M. WILSON		
Group Art Unit	1638		
Examiner Name	G. Helmer		
Attorney Docket Number	N1205-014		

Title of the Invention: Methods for Tissue Culturing and Transforming Elite Inbreds of Zea Mays L.

EXTENSION OF TIME

Commissioner of Patents P O Box 1450 Alexandria VA 22313-1450

Sir:

Applicant requests an extension of time for three months for the purpose of filing the enclosed Amendment. Enclosed is our check in the amount of \$950.00 to cover this extension. If it is determined that additional fees are due, please charge the cost of them to deposit account no. 50-2368 in the name of Jondle & Associates P.C.

Respectfully submitted

07/28/2004 HGUTEMA1 00000019 09917965

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950.00 OP

Robert J. Jondle

Registration No. #33,915

JONDLE & ASSOCIATES P.C. Suite 200, 9085 East Mineral Circle Centennial CO 80112 Telephone: (303) 799-6444

OTP E VOS OTP	E CS					
JUL 2 JUL 2		Complete if Known				
FEE TRANSMITTAL for FY 2003 (Large Entity)		Application Number	09/917,965			
		Filing Date	July 30, 2001			
		First Named Inventor	Herbert M. WILSON			
		Examiner Name	G. Helmer			
		Group Art Unit	1638			
Total Amount of Payment	\$950.00	Attorney Docket Number	N1205-014			

METHOD OF PAYMENT (check or	ne)	FEE (CALCU	LATION (continued)		
The Commissioner is hereby auth	norized to charge	3. AD	OITIO	NAL FEES		
additional fees and credit any over		Fee	Fee			
Deposit Account Number 50-236		Code	Paid	Fee Description	Fee Pa	hic
Jondle & Associates P.C.	oo iii tile name oi	1051	130	Surcharge - late filing fee or oath	1	1
Johns & Associates F.C.		1052	50	Surcharge - late provisional filing fee	I I	1
		1002	00	or cover sheet	ı	j
X Charge any Additional Fee Requi	red Under	1053	130	Non-English specification	r	1
37 CFR 1.16 and 1.17		1812	2,520	For filing a request for reexamination	i .	.1
		1804	920	Requesting publication of SIR	l i	ı 1
Applicant claims small entity state	us	1004	320	prior to Examiner action	ι	1
		1805	1,840*	Requesting publication of SIR	r	1
6 V B		1005	1,040	after Examiner action	l	J
2. X Payment Enclosed		1251	110	Extension for reply within first month	г	,
X Check		1251	420		ļ	ļ
Credit Card				Extension for reply within second month	l	j
Credit Card		1253	950	Extension for reply within third month	[950.	į
		1254	1,480	Extension for reply within fourth month	ļ	j
FEE CALCULATION		1255	2,010	Extension for reply within fifth month	ļ	j
		1401	330	Notice of Appeal	Ī	j
1. FILING FEE		1402	330	Filing a brief in support of an appeal	Į]
Fee Fee		1403	290	Request for Oral Hearing	Ī	j
Code \$ Fee Description	Fee Paid	1451	1,510	Petition to institute a public use proceeding	Ţ]
1001 770 Utility filing fee	1 001 010	1452	110	Petition to revive -unavoidable	[Ţ
1002 340 Design Filing Fee	l J	1453	1,330	Petition to revive - unintentional	[]
1003 530 Plant Filing Fee	l J	1501	1,330	Utility issue fee (or reissue)	[]
1004 770 Reissue Filing Fee	l j	1502	480	Design issue fee	[]
1004 770 Reissde Filing Fee	l J	1503	640	Plant issue fee	[]
1005 100 Flovisional Filling Fee	l J	1460	130	Petitions to the Commissioner	[]
CURTOTAL	Φ.	1807	50	Processing fee under 37 CFR 1.17(q)	[]
SUBTOTAL	\$	1806	180	Submission of Information Disclosure Statement]
2. CLAIMS		8021	40	Recording each patent assignment per property (times number of properties)	[]
Extra		1809	770	Filing a submission after final rejection	[]
Claims	Fee Fee			(37 CFR .129(a))		
Paid		1810	770	For each additional invention to be	[]
Total Claims [] - 20** = [] x	\$18 = []			examined (37 CFR 1.129(b))		
Independent		1801	770	Request for Continued Examination (RCE)	ſ	1
Claims [] - 3^{**} = [] x	86 = []	1802	900	Request for expedited examination	ĺ	j
Multiple Dependent Claims +	290 = []			of a design application	•	•
		1504	300	Publication fee for early, voluntary, or	ſ	1
**or number previously paid, if greater;				normal publication	•	•
or married promoderly para, in grounds,		1505	300	Publication fee for republication	ſ	1
SUBTOTAL	\$	1455	200	Filing application for patent term adjustment	í	í
SOBIOTAL	Ψ	1456	400	Request for reinstatement of term reduced	i	í
	,	1814	110	Statutory Disclaimer	i	í
				Other fee (specify)	•	,
		* Reduc	ced by Ba	* * * **	\$950.	.00

SUBMITTED BY			Complete (if applicable)	Complete (if applicable)	
NAME AND REG. NUMBER	Robert J. Jondle, Reg. No. 33,915				
SIGNATURE	Holes Jarolle	DATE	July 26, 2004	DEPOSIT ACCOUNT USER ID	